

REMARKS

Claims 1-27 are pending in this application with claims 1, 4, 18, 26, and 27 being amended by this response. Support for these amendments may be found throughout the specification and specifically addressed on page 5, lines 18-23, page 8, lines 8-30, page 9, lines 6-31, page 10, lines 1-2, page 14, lines 1-28, page 16, lines 29-31, page 22, lines 16-31, and page 23, lines 1-6. Applicant respectfully submits that no new matter is added by these amendments. Claim 5 has been cancelled.

Rejection of Claims 26-27 under 35 U.S.C. 101

Claims 26 and 27 are rejected under 35 U.S.C. 101 because the claimed invention is directed to non-statutory subject matter.

The Office Action asserts that claims 26 and 27 are directed towards a method but do not recite a device used for carrying out the method. According to the recommendation of the Examiner, Claims 26 and 27 have been amended accordingly to recite a device used for carrying out the method. Specifically, both Claims 26 and 27 now recite “[a] method implemented by a d^ata processing device conditioned for enabling an individual user to access and maintain healthcare records concerning encounters of an individual with a healthcare provider organization, said encounters comprising interactions of said individual with said healthcare provider organization 6 having a financial consequence.” Therefore, applicant respectfully submits that amended claims 2 and 27 are directed toward a device for carrying out the method. As such, it is respectfully requested that the rejection of claims 26 and 17 be withdrawn.

Rejection of Claim 12 under 35 U.S.C. 112, second paragraph

Claim 12 is rejected under 35 U.S.C. 112, second paragraph because the limitation “update” of claim 12 has insufficient antecedent basis. Claim 12 has been amended to recite “said storage processor monitors an update of said stored received healthcare encounter information.” Therefore, Claim 12 now has sufficient antecedent basis for the limitation “update.” Consequently, it is respectfully submitted that the rejection to claim 12 be withdrawn.

Rejection of Claims 1-7, 9-17 and 26 under 35 U.S.C. 102(e)

Claims 1-7, 9-17 and 26 are rejected under 35 U.S.C. 102(e) as being anticipated by Yaur (US Patent Application Publication No. 2004/0167835).

Amended claim 1 describes a financial management system enabling an individual user to access and maintain healthcare records concerning encounters of an individual with a healthcare provider organization. The encounters comprise interactions of the individual with the healthcare provider organization having a financial consequence. An acquisition processor is conditioned for receiving, via electronic communication from a healthcare provider organization, information related to at least one healthcare encounter of an individual user and includes data identifying a healthcare service of at least one healthcare encounter. A storage processor stores the received healthcare encounter information and updates of the received healthcare encounter information. A data processor retrieves and processes received healthcare encounter information to provide data representing at least one record indicating a history of encounters of the individual user with the healthcare provider organization. The data processor also at least one of: (a) automatically initiates payment for the healthcare service of at least one healthcare encounter indicated by the encounter history information in response to a predetermined payment instruction entered by a user, and (b) terminates an automatically initiated payment for the healthcare service of at least one healthcare encounter in response to user command. An output processor processes the data representing at least one record for output in response to user command. For the reasons presented below, Applicant respectfully submits that Yaur fails to disclose or suggest each feature of amended claim 1.

Yaur describes a system that creates records for identifying items supporting tax determination. The system includes an input processor for receiving information identifying a service provided to a specific entity and to be at least partially paid for by the specific entity. A data processor automatically identifies the type of service identified in the received information and allocates a predetermined tax related identification code to the service based on the service type and incorporates the allocated code, together with information identifying the service, in data representing a record. An output processor processes the data representing the record for output in response to a user command. (See Abstract)

Unlike the claimed system, Yaur neither discloses nor suggests “an acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1. Yaur merely describes a “record keeping system” that

includes a server including “data storage devices 3 and 4 which store information that is utilized by the record keeping and report generating program 5” (paragraph [0015]). In addition, the records generated in Yaur only show charges for specific services that “may or may not have some tax related significance” (paragraph [0016])). No mention or suggestion is made of “data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement. Contrary to Yaur, the present claimed arrangement provides specific features pertinent to the healthcare industry. Specifically, it is provided that “[a] patient’s bill may have information categorizing each service (e.g., by healthcare department)” (page 9, lines 14-15). The “data identifying a healthcare service of said at least one healthcare encounter” is recited on page 14, lines 10-19 of the specification. In addition, further “data identifying a healthcare service of said at least one healthcare encounter” is provided from healthcare sources, including “a hospital system, a medical system, and a physician system, a records system, a radiology system, an accounting system, a billing system” (page 14, lines 21-24). To reiterate and emphasize, Yaur merely provides a record or charges “incurred by a consumer of services” (paragraph [0016]). In no way is Yaur specifically tailored for usage in a hospital or the medical industry as the present claimed arrangement. Yaur does not show specific “data identifying a healthcare service” of a healthcare encounter. Therefore, Yaur neither discloses nor suggests “an acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement.

Furthermore, Yaur also fails to either disclose or suggest “(a) automatically initiating payment for said healthcare service of said at least one healthcare encounter indicated by the encounter history information in response to predetermined payment instruction entered by a user, and (b) terminating an automatically initiated payment for said healthcare service of said at least one healthcare encounter in response to user command” as recited in amended claim 1 of the present arrangement. Yaur describes a data processor that correlates data with item records in a patient record and creates a report intended to be used by a consumer or tax professional in determining tax liability (paragraph [0019]). A billing process is also available to generate bills in printed or electronic form, and payments may also be collected (paragraph [0021]). However, Yaur fails to show or suggest “automatically initiating payment . . . in response to predetermined payment information entered by a user” or “terminating an automatically initiated payment in response to user command”. In fact Yaur neither discloses nor suggests any system that may support automatic payments. In the present claimed arrangement “[t]he personal system 106 generates payments 112 and 114 responsive to receiving the consumer information 110” (page 8,

lines 8-9). This is unlike the present claimed arrangement, where “a data processor” is capable of “automatically initiating payment for said healthcare service . . . in response to predetermined payment instruction entered by a user.” Therefore, Yaur neither discloses nor suggests “(a) automatically initiating payment for said healthcare service of said at least one healthcare encounter indicated by the encounter history information in response to predetermined payment instruction entered by a user, and (b) terminating an automatically initiated payment for said healthcare service of said at least one healthcare encounter in response to user command” as recited in amended claim 1 of the present arrangement. Therefore, as each feature of amended claim 1 is neither disclosed nor suggested by Yaur, applicant respectfully submits that Yaur does not anticipate claim 1. Consequently, applicant respectfully submits that the rejection to amended claim 1 be withdrawn.

Claims 2-3 are dependent on claim 1 and are considered patentable for the reasons presented above regarding claim 1. Consequently, it is respectfully submitted that the rejection to claims 2-3 be withdrawn.

Claim 4 is dependent on claim 1 and is considered patentable for the reasons presented above regarding claim 1. In addition, claim 4 is also considered patentable because Yaur neither discloses nor suggests “said history of encounters identifies individual services of individual encounters of said individual user with said healthcare provider organization” as recited in amended claim 4 of the present arrangement. While Yaur may provide that a data processor prompts a user to initiate payment related to a healthcare encounter (paragraph [0021]), “individual services of individual encounters” are not shown. Yaur merely provides payment related to a healthcare encounter as an option in addition to other payment options. This is not the same as specific information regarding “the history of encounters” identifying “individual services of individual user with said healthcare provider organization.” Therefore, Yaur neither discloses nor suggests “said history of encounters identifies individual services of individual encounters of said individual user with said healthcare provider organization” as recited in amended claim 4 of the present arrangement. Consequently, it is respectfully submitted that the rejection to amended claim 4 be withdrawn.

Claims 6, 7, and 9-17 are dependent on claim 1 and are considered patentable for the reasons presented above regarding claim 1. Consequently, it is respectfully submitted that the rejection to claims 6, 7, and 9-17 be withdrawn.

Independent claim 26 is a method claim of apparatus claim 1. As such, claim 26 is considered patentable for the reasons presented above regarding claim 1. Consequently, it is respectfully submitted that the rejection to claim 26 be withdrawn.

Rejection of Claim 8 under 35 U.S.C. 103(a)

Claim 8 is rejected under 35 U.S.C. 103(a) as being unpatentable over Yaur (US Patent Application Publication No. 2004/0167835) in view of Boyer et al. (U.S. Patent No. 6,208,973).

Boyer describes a point of service third party adjudicated payment system and method which provides for the creation of an adjudicated settlement transaction at a point of service which designates the portion of the service to be paid by the third party payor and the portion to be paid by the customer. The system includes a point of service terminal which accepts a payment system access card, such as a credit card, debit card, or purchase card, for payment for a purchase of a service and/or product by a customer, where at least part of the purchase is reimbursable by a third party payor. The point of service terminal creates a purchase transaction which is adjudicated by an adjudication engine substantially in real-time (at the time of service or in a purchase transaction processing batch) to determine a first portion of the purchase which is to be paid by the third party payor and a second portion of the purchase which is to be paid by the customer. An adjudicated settlement transaction is returned to the point of service terminal designating at least the first portion and the second portion for payment. The payment system access card provides access to a payment system which transfers funds in accordance with the adjudicated settlement transaction whereby the third party payor is debited by the first portion and a payment account accessibly by the payment system access card is charged at least the second portion and the point of service provider is paid the second portion as with typical payment card transactions. (See Abstract)

The Office Action recognizes that Yaur does not describe that the “communication processor provides, to said information system, identification information of said individual user together with at least one of, (i) a password and (ii) information identifying said authorization of said individual user to access said information system” as recited in claim 8 of the present arrangement. However, the Office Action states that Boyer describes that the “communication processor provides, to said information system, identification information of said individual user together with at least one of, (i) a password and (ii) information identifying said authorization of said individual user to access said information system” as recited in claim 8 of the present arrangement.

Claim 8 is dependent on claim 1, and Yaur, with or without Boyer neither discloses nor suggests “an acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement. Yaur merely describes a “record keeping system” that includes a server including “data storage devices 3 and 4 which store information that is utilized by the record keeping and report generating program 5” (paragraph [0015]). In addition, the records generated in Yaur only show charges for specific services that “may or may not have some tax related significance” (paragraph [0016]). No mention or suggestion is made of “data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement. To reiterate and emphasize, Yaur merely provides a record or charges “incurred by a consumer of services” (paragraph [0016]). In no way is Yaur specifically tailored for usage in a hospital or the medical industry to describe “an acquisition processor conditioned for receiving . . . data identifying a healthcare service “. Therefore, Yaur neither discloses nor suggests “an acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement.

Similarly to Yaur, Boyer also neither discloses nor suggests “an acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement. Boyer merely describes a system where claims submitted by a healthcare provider may be edited to “check eligibility, validate incidents, and to validate the diagnosis” (page 15, lines 26-28). In addition, a payment system is available where either an access card is “validated by checking its number and expiration date” or by “providing an ID and password from the healthcare provider” (page 15, lines 25-33). This is not the same as “an acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement. Therefore, Boyer, similarly to Yaur, also neither discloses nor suggests, “an acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement.

As Yaur and Boyer taken alone respectively do not describe or suggest “an acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter,” Yaur and Boyer, in combination, also do not disclose or suggest “an

acquisition processor conditioned for receiving . . . data identifying a healthcare service of said at least one healthcare encounter” as recited in amended claim 1 of the present arrangement.

In addition, Yaur also fails to either disclose or suggest “(a) automatically initiating payment¹ for said healthcare service of said at least one healthcare encounter indicated by the encounter history information in response to predetermined payment instruction entered by a user, and (b) terminating an automatically initiated payment for said healthcare service of said at least one healthcare encounter in response to user command” as recited in amended claim 1 of the present arrangement. Yaur describes a data processor that correlates data with item records in a patient record and creates a report intended to be used by a consumer or tax professional in determining tax^x liability (paragraph [0019]). A billing process is also available to generate bills in printed or electronic form, and payments may also be collected (paragraph [0021]). However, Yaur makes no mention of an “automatically initiating payment . . . in response to predetermined payment information entered by a user” or “terminating an automatically initiated payment in response to user command” as the present claimed arrangement does. In fact Yaur neither discloses nor suggests any system that may support automatic payments. In the present claimed arrangement “[t]he personal system 106 generates payments 112 and 114 responsive to receiving the consumer information 110” (page 8, lines 8-9). In addition, “[a] patient may configure the personal system 106 to automatically initiate payment related to one or more encounters by setting up an automatic payment instruction” (page 8, lines 14-16). This provides the advantage of a patient not having to look at and approve or authorize each and every payment as a patient is required to do in Yaur. Finally, “the patient may terminate an automatically initiated payment and payment instruction related to an encounter in response to a patient command” (page 8, lines 17-18). The aforementioned features do not exist in Yaur. Therefore, Yaur also neither discloses nor suggests “(a) automatically initiating payment for said healthcare service of said at least one healthcare encounter indicated by the encounter history information in response to predetermined payment instruction entered by a user, and (b) terminating an automatically initiated payment for said healthcare service of said at least one healthcare encounter in response to user command” as recited in amended claim 1 of the present arrangement.

Boyer, similarly to Yaur, also does not disclose or suggest “(a) automatically initiating payment for said healthcare service of said at least one healthcare encounter indicated by the encounter history information in response to predetermined payment instruction entered by a user, and (b) terminating an automatically initiated payment for said healthcare service of said at least

one healthcare encounter in response to user command” as recited in amended claim 1 of the present arrangement. Boyer makes no mention of the aforementioned feature. Boyer merely describes a payment system with user validation, but is completely silent regarding automatic payments based on predetermined payment instructions, or termination of the same automatic payments. Therefore, Boyer, similarly to Yaur, neither discloses nor suggests “(a) automatically initiating payment for said healthcare service of said at least one healthcare encounter indicated by the encounter history information in response to predetermined payment instruction entered by a user, and (b) terminating an automatically initiated payment for said healthcare service of said at least one healthcare encounter in response to user command” as recited in amended claim 1 of the present arrangement.

Finally, as Yaur and Boyer taken alone respectively do not describe the aforementioned feature, the combination of Yaur and Boyer also do not disclose or suggest “(a) automatically initiating payment for said healthcare service of said at least one healthcare encounter indicated by the encounter history information in response to predetermined payment instruction entered by a user, and (b) terminating an automatically initiated payment for said healthcare service of said at least one healthcare encounter in response to user command” as recited in amended claim 1 of the present arrangement. As claim 8 is dependent on claim 1, all arguments presented above regarding claim 1 apply to claim 8. Therefore, it is respectfully requested that the rejection to claim 8 be withdrawn.

Rejection of Claims 18-22, 24 and 27 under 35 U.S.C. 103(a)

Claims 18-22, 24 and 27 are rejected under 35 U.S.C. 103(a) as being unpatentable over Yaur (U.S. Patent Application Publication No. 2004/0167835) in view of Boyer et al. (U.S. Patent No. 6,208,973).

Independent claim 18 describes a system for use by a healthcare provider organization supporting individual user access to healthcare records concerning encounters of an individual with a healthcare provider organization. The encounters comprise interactions of the individual with the healthcare provider organization having a financial consequence. An interface processor receives user identification and authorization information for identifying authorization of the user to access the healthcare encounter information of the user. A data processor retrieves the healthcare encounter information of the identified user from storage and includes data identifying a healthcare service of the healthcare encounter and formats the retrieved healthcare encounter information and

data identifying a healthcare service of the healthcare encounter of the user for communication to a user communication address. The data processor may also (a) automatically initiate payment for the healthcare service of at least one healthcare encounter indicated by the encounter history information in response to predetermined payment instruction entered by a user, and (b) terminate an automatically initiated payment for healthcare service of at least one healthcare encounter in response to user command. A communication processor communicates the formatted healthcare encounter information to the user communication address.

Claim 18 contains features similar to those of claim 1, the arguments presented above regarding claim 1 are applicable to claim 18 as well. Therefore, it is respectfully requested that the 35 U.S.C. 103(a) rejection to claim 18 be withdrawn.

Claims 19-22, and 24 are dependent on claim 18 and are considered patentable for the reasons presented above regarding claim 18. Consequently, it is respectfully submitted that the rejection to claims 19-22, and 24 be withdrawn.

Amended independent claim 27 is the method claim for apparatus claim 18. Claim 27 contains features similar to those of claim 18 and is considered patentable for the reasons presented above regarding claim 18. Consequently, it is respectfully submitted that the rejection to claim 18 be withdrawn.

Rejection of Claim 23 under 35 U.S.C. 103(a)

Claim 23 is rejected under 35 U.S.C. 103(a) as being unpatentable over Yaur (U.S. Patent Application Publication No. 2004/0167835) in view of Boyer et al. (U.S. Patent No. 6,208,973) and in further view of Official Notice.

Claim 23 is dependent on claim 18 and is considered patentable for the reasons presented above regarding claim 18. Consequently, it is respectfully requested that the rejection to claim 23 be withdrawn.

Rejection of Claim 25 under 35 U.S.C. 103(a)

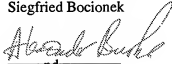
Claim 25 is rejected under 35 U.S.C. 103(a) as being unpatentable over Yaur (U.S. Patent Application Publication No. 2004/0167835) in view of Boyer et al. (U.S. Patent No. 6,208,973) and in further view of Official Notice.

Claim 25 is dependent on claim 18 and is considered patentable for the reasons presented above regarding claim 18. Consequently, it is respectfully requested that the rejection to claim 23 be withdrawn.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

March 6, 2009

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